

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Coventry Health Care Inc - First Health Group PAC

ADDRESS (number and street)

901 New York Avenue NW Third Floor

Check if different  
than previously  
reported. (ACC)

Washington

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00217216

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Quarterly Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

John Ruhlmann

Signature of Treasurer

Electronically Filed by John Ruhlmann

Date

04

18

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Coventry Health Care Inc - First Health Group PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		119223.96
(b) Cash on Hand at Beginning of Reporting Period .....	122098.70	
(c) Total Receipts (from Line 19) .....	3923.16	13297.90
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	126021.86	132521.86
7. Total Disbursements (from Line 31) .....	7500.00	14000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	118521.86	118521.86
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Coventry Health Care Inc - First Health Group PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2011.26	6063.19
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1911.90	7234.71
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	3923.16	13297.90
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	3923.16	13297.90
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	3923.16	13297.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3923.16	13297.90

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	12000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	2000.00	2000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7500.00	14000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7500.00	14000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	3923.16	13297.90
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3923.16	13297.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 19

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Michael Bahr

Mailing Address 4669 W. Vista Drive

City

Highland

State

UT

Zip Code

84003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522242

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Richard Bates

Mailing Address 12205 Scarlet Tanager Drive

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522192

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Richard Bates

Mailing Address 12205 Scarlet Tanager Drive

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522251

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

170.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

E. Pauline Degenfelder

Mailing Address 3103 Morlen Road

City

Shaker Heights

State

OH

Zip Code

44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522237

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

David Finkel

Mailing Address 550 Maryville Center Drive

City

St. Louis

State

MO

Zip Code

63141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522193

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

David Finkel

Mailing Address 550 Maryville Center Drive

City

St. Louis

State

MO

Zip Code

63141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522252

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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PAGE 8 / 19

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Maria Fitzpatrick

Mailing Address 5002 Cedar Croft Drive

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522196

Amount of Each Receipt this Period

58.00

**B.**

Full Name (Last, First, Middle Initial)

Maria Fitzpatrick

Mailing Address 5002 Cedar Croft Drive

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522255

Amount of Each Receipt this Period

58.00

**C.**

Full Name (Last, First, Middle Initial)

Vishu Jhaveri

Mailing Address 1501 Applecroft Lane

City

Cockeysville

State

MD

Zip Code

21030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522198

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

176.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial)

Vishu Jhaveri

Mailing Address 1501 Applecroft Lane

City State Zip Code  
 Cockeysville MD 21030

FEC ID number of contributing federal political committee.

C

Name of Employer  
Coventry Health Care Inc.Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522257

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Kenneth Kurzendoerfer

Mailing Address 5104 Remington Road

City State Zip Code  
 San Diego CA 92115

FEC ID number of contributing federal political committee.

C

Name of Employer  
Coventry Health Care Inc.Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522165

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Kenneth Kurzendoerfer

Mailing Address 5104 Remington Road

City State Zip Code  
 San Diego CA 92115

FEC ID number of contributing federal political committee.

C

Name of Employer  
Coventry Health Care Inc.Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522224

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional) .....

210.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Kathleen Mallatt

Mailing Address 4304 South 16th Avenue

City

Omaha

State

NE

Zip Code

68135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.72

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522187

Amount of Each Receipt this Period

76.93

**B.**

Full Name (Last, First, Middle Initial)

Kathleen Mallatt

Mailing Address 4304 South 16th Avenue

City

Omaha

State

NE

Zip Code

68135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.65

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522246

Amount of Each Receipt this Period

76.93

**C.**

Full Name (Last, First, Middle Initial)

Mary Louise Osborne

Mailing Address 234 Overbrook Road

City

Valencia

State

PA

Zip Code

16059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522188

Amount of Each Receipt this Period

58.00

**SUBTOTAL** of Receipts This Page (optional) .....

211.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Mary Louise Osborne

Mailing Address 234 Overbrook Road

City

Valencia

State

PA

Zip Code

16059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522247

Amount of Each Receipt this Period

58.00

**B.**

Full Name (Last, First, Middle Initial)

Wayne Page

Mailing Address 15746 Cherry Blossom Lane

City

North Potomac

State

MD

Zip Code

20878

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522248

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Gerard Quinn

Mailing Address 1402 Chippendale Road

City

Lutherville

State

MD

Zip Code

21093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522155

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

168.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 19

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Gerard Quinn

Mailing Address 1402 Chippendale Road

City

Lutherville

State

MD

Zip Code

21093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	0	8

Transaction ID: A2008-522214

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Allen Spath

Mailing Address 13250 Windsong Lane  
Suite 450

City

Clarksburg

State

MD

Zip Code

20871

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	0	8

Transaction ID: A2008-522232

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Ernest Wells Jr

Mailing Address 2107 N. Magnolia Ave.

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	0	8

Transaction ID: A2008-522146

Amount of Each Receipt this Period

57.70

SUBTOTAL of Receipts This Page (optional) .....

167.70

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Ernest Wells Jr

Mailing Address 2107 N. Magnolia Ave.

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522205

Amount of Each Receipt this Period

57.70

**B.**

Full Name (Last, First, Middle Initial)

Dorothy Williamson

Mailing Address 4404 Wilson Avenue

City

Downers Grove

State

IL

Zip Code

60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522182

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Dorothy Williamson

Mailing Address 4404 Wilson Avenue

City

Downers Grove

State

IL

Zip Code

60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522241

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

257.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Joseph Winn

Mailing Address 14022 Jump Drive

City

Germantown

State

MD

Zip Code

20874

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522191

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph Winn

Mailing Address 14022 Jump Drive

City

Germantown

State

MD

Zip Code

20874

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522250

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Dale Wolf

Mailing Address 9012 Congressional Court

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: A2008-522181

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Dale Wolf

Mailing Address 9012 Congressional Court

City State Zip Code  
 Potomac MD 20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coventry Health Care Inc.

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 1 / 2 0 0 8

Transaction ID: A2008-522240

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

2011.26

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Bob Casey For Senate	<b>Transaction ID:</b> B209972 <b>Date of Disbursement</b>																				
Mailing Address 888 16th Street NW Suite 570A	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	0	8												
City Washington State DC Zip Code 20006	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Bob Casey, Jr.	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Murphy for Congress	<b>Transaction ID:</b> B209973 <b>Date of Disbursement</b>																				
Mailing Address 700 12th St. NW Suite 700	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	0	8												
City Washington State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Tim Murphy	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 18																					
<b>C.</b> Full Name (Last, First, Middle Initial) Pat Roberts for Senate	<b>Transaction ID:</b> B211734 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 433	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	2		2	0	0	8												
City Great Bend State KS Zip Code 67530	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Pat Roberts	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

A.

Full Name (Last, First, Middle Initial)

Cantor for Congress

Mailing Address P.O. Box 21027

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement  
Contribution

Candidate Name  
Eric I Cantor

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 07

Transaction ID: B211738

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2008

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

5500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Coventry Health Care Inc - First Health Group PAC

**A.**

Full Name (Last, First, Middle Initial)

Friends of Dominic Pileggi

Mailing Address 101 W. Baltimore Ave. 2nd Floor

City State Zip Code  
Media PA 19063

Purpose of Disbursement  
P-2008 State Senate 09 PA

Candidate Name  
Dominic F Pileggi

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

**Transaction ID: B211737**

Date of Disbursement

03 / 14 / 2008

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Friends of Don White

Mailing Address P.O. Box 363

City State Zip Code  
Indiana PA 15701

Purpose of Disbursement  
P-2008 State Senate 41 PA

Candidate Name  
Donald C White

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

**Transaction ID: B211735**

Date of Disbursement

03 / 14 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

2000.00

Form/Schedule: **SA11AI**

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

\*\*\*\*\*